## L0200001249

(Re	questor's Name)	
— FCI PO Box. — Miami, f	69-3029 7 33269	
(Cit	y/State/Zip/Phone	e#}
<u></u>	WAIT	·
(Bu	siness Entity Nar	ne)
(20	omoco chily man	ney
(Do	cument Number)	
(==		
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900022139669

08/11/03--01039--007 \*\*35.00

03 007 -0 PM 3: 35

W2-1249



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 14, 2003

FCI P.O. BOX 69-3029 MIAMI, FL 33269

SUBJECT: FUTURE CONCEPTS & INVESTMENTS, L.L.C.

Ref. Number: L02000001249

We have received your document for FUTURE CONCEPTS & INVESTMENTS, L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 403A00046299

D3 DCT - O BY CAST

## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 16, 2003

FCI PO BOX 69-3029 MIAMI, FL 33269

SUBJECT: FUTURE CONCEPTS & INVESTMENTS, L.L.C.

Ref. Number: L02000001249

JENETAL OF STATE

We have received your document for FUTURE CONCEPTS & INVESTMENTS, L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 103A00051260

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR ROTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.\\$16 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

agent, or both, in the State of Florida.
1. The name of the limited liability company is: Fotore Concepto & Tourstments, LC
2. The mailing address of the limited liability company is: 610 NW 214 street 50ite 103.
O1/16/2002  3. Date of filing/registration in Florida  L0200001249  4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Agents and Corporations, Inc.  Name  Suite 600, One Commerce Center  Address  1201 N. Orange Street, Wilmington, DE 19899-0511
6. The name and address of the new registered agent and/or office:    Compared   Compare
Ulami FL 33169 City, State and Zip
City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.  (Signature of a member or authorized representative of a member)
Karry B. D. I
(Printed or typed name of signee)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608 F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been natified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

**FILING FEE: \$25.00**